PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031

09/893.578

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| | | Application Number | er 09/ | /893,578 | | | | |
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| TRANSMI | Filing Date | Jur | June 29, 2001 | | | | | |
| FORI | VI | First Named Inven | tor Mik | klos Sagi | | | | |
| | | Art Unit | 215 | 52 | | | | |
| (to be used for all correspond | ence after initial filing) | Examiner Name | D. (| Chankong | | | | |
| Total Number of Pages in This | | Attorney Docket N | Attorney Docket Number 004770.00565 | | | | | |
| | ENC | LOSURES (check all tha | t apply) | | | | | |
| Fee Transmittal Form | ☐ Drawing | g(s) | | After Allowance Communication to TC | | | | |
| Fee Attached | Licensi | Licensing-related Papers | | Appeal Communication to Board of Appeals and Interferences | | | | |
| Amendment / Reply | Petition | | | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) | | | | |
| After Final | the same of the sa | to Convert to a onal Application | | Proprietary Information | | | | |
| Affidavits/declaration(| Power | of Attorney, Revocation e of Correspondence Add | ress | Status Letter | | | | |
| Extension of Time Reque | st Termin | al Disclaimer | | Other Enclosure(s) (please identify below): | | | | |
| Express Abandonment Re | equest = | st for Refund | Tran | Request for Continued Examination (RCE) Transmittal Statement under 37 CFR 3.73(b) | | | | |
| ☐ Information Disclosure St | atement | andscape Table on CD | Pow | Power of Attorney to Prosecute Applications before the USPTO | | | | |
| Certified Copy of Priority Document(s) | Remarks | Remarks | | | | | | |
| Reply to Missing Parts/ Incomplete Application | | | | | | | | |
| Reply to Missing Par under 37 CFR1.52 or | | | | , | | | | |
| | SIGNATURE O | F APPLICANT, ATTO | RNEY, OR AG | GENT | | | | |
| Firm | Banner | nner & Witcoff, LTD. | | | | | | |
| Signature | ant | Anty W. La San | | | | | | |
| Printed Name | | Anthony W. Kandare | | | | | | |
| Date | Novemb | November 28, 2005 Reg. No. | | 48,830 | | | | |
| | CERTIFIC | CATE OF TRANSMISS | SION/MAILING | G | | | | |
| I hereby certify that this corr Service with sufficient posta Alexandria, VA 22313-1450 c | age as first class ma | il in an envelope addre | he USPTO or d ssed to: Comm | deposited with the United States Posta missioner for Patents, P.O. Box 1450 | | | | |
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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| Application Type Fee Seal Entity Small Enti | Pees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | | Complete if Known | | | | | | |
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| Application Type Fee Si | ら、 LEE IKAN2MIIIYT | | | | Application Number | | | | | | |
| Application Type Fee Si | O | | | Filing Date | June 29, 2001 | | | | | | |
| Application Type Fee Si | NOV 2 P | | | First Named Inventor | Miklos Sagi | | | | | | |
| Attorney Docket No | Applicant define small entity status See 37 CER 1 27 | | | | Examiner Name | D. Chankong | | | | | |
| Attorney Docket No 004770.00565 | TOTAL AMOUNT OF PAYMENT (\$) 2,290.00 | | · | Art Unit | 2152 | | | | | | |
| Check | | | (ψ) 2,290.00 | | Attorney Docket No. | 004770.00565 | | | | | |
| Deposit Account Name: Banner & Witcoff, LTD. | METHOD OF PAYMENT (check all that apply) | | | | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below | ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : | | | | | | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee Charge any additional tee(s) or underpayments of fee(s) Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Credit any overpayments EXAMINATION FEES FEE(S) F | □ Deposit Account Deposit Account Number: 19-0733 Deposit Account Name: Banner & Witcoff, LTD. | | | | | | | | | | |
| Charge any additional fee(s) or underpayments of fee(s) | | • | | the Director is he | <u> </u> | | | | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form, Provide credit card information and authorization on PTO-2038. FEE CALCULATION | <u> </u> | ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee | | | | | | | | | |
| ### WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card Information and authorization on PTO-2038. ### FILING FEES SEARCH FEES SEARCH FEES Small Entity | | | | | | | | | | | |
| BASIC FILING, SEARCH, AND EXAMINATION FEES SEARCH FEES Small Entity Small | WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and | | | | | | | | | | |
| Filing Fies Small Entity Small | FEE CALCULATION | | | | | | | | | | |
| Multiple dependent claims Fee (\$) Fee (\$ | 1. BASIC FILING, S | | | | | | | | | | |
| Application Type | | • | | | | | | | | | |
| Design 200 100 100 50 130 65 | | | Fee(\$) | Fee(| _ | | | Fees Paid (\$) | | | |
| Plant | | | | | | | | | | | |
| Reissue 300 150 500 250 600 300 | • | | | | | | | | | | |
| Provisional 200 100 0 0 0 0 0 0 0 0 | _ | | | | 7.7.7 | | | - | | | |
| 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claims Found it is dependent claims Total Claims Total Claims Extra Claims Fee(\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims 8 - 6 or HP = 2 x 200 = 400.00 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Request for Continued Examination Fee (\$790) and 2-month Extension of Time Fee (\$450) SUBMITTED BY Signalure Signalure Seminative including Reissues Fee (\$\$) Fee (\$\$) Fee (\$\$) Fee Paid (\$\$) | | | | | | | | | | | |
| Fee Description Fee (\$) Fee (\$ | | | 100 | U | U | U | U | Cmall Entity | | | |
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| Indep. Claims Extra Claims B - 6 or HP= 2 x 200 = 400.00 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof [Fee (\$) Fee Paid (\$) [Fees Paid (\$) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Request for Continued Examination Fee (\$790) and 2-month Extension of Time Fee (\$450) SUBMITTED BY Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) 48,830 Telephone 202.824.3000 | _ | | | | <u>650.00</u> | | <u>Fee (\$</u> |) <u>Fee Paid (\$)</u> | | | |
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| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Request for Continued Examination Fee (\$790) and 2-month Extension of Time Fee (\$450) Submitted by Signature Registration No. (Attorney/Agent) 48,830 Telephone 202.824.3000 | sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Shoots Extra Shoots Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) | | | | | | | | | | |
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